

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	CM	71652	3/18/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 0 Objected

Claim	Date
1 1	✓ =
2 2	✓
3 3	✓
4 4	✓
5 5	✓
6 6	✓
7 7	✓
8 8	✓
9 9	✓
10 10	✓
11 11	✓
12 12	✓
13 13	✓
14 14	✓
15 15	=
16 16	=
17 17	=
18 18	✓
19 19	✓
20 20	
21 21	
22 22	=
23 23	✓
24 24	✓
25 25	✓
26 26	✓
27 27	✓
28 28	✓
29 29	✓
30 30	✓
31 31	✓
32 32	=
33 33	✓
34 34	=
35 35	✓
36 36	✓
37 37	✓
38 38	✓
39 39	
40 40	
41 41	=
42 42	✓
43 43	✓
44 44	✓
45 45	✓
46 46	✓ =
47 47	
48 48	
49 49	
50 50	=

Claim	Date
51 51	✓ =
52 52	✓
53 53	✓
54 54	✓
55 55	✓
56 56	=
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59 59	✓ =
60 60	✓ =
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here